

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	7/17/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	C. Y. C.	36530	8-23-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	7/01 12/01 9/02 5/03
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If more than 150 claims or 10 actions
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